

**PATENT APPLICATION FEE DETERMINATION RECORD**

**Effective October 1, 2001**

**10/049327**

## CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	35 minus 20 =	15
INDEPENDENT CLAIMS	4 minus 3 =	1
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

• If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

AMENDMENT A	(Column 1)		(Column 2)		(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
Total	18	Minus	as 35		
Independent	1	Minus	as 4		
FIRST PRESENTATION OF MULTIPLE DEPENDENT/CLAIM <input type="checkbox"/>					

SMALL ENTITY  
TYPE ☒

RATE	FEE
BASIC FEE	50
X50=	135
X42=	42
+140=	
TOTAL	

**OF**

**OTHER THAN  
SMALL ENTITY**

RATE	FEE
BASIC FEE	
X\$18=	
X\$4=	
+280=	
TOTAL	

**SMALL ENTITY**

RATE	ADDITIONAL FEE
X\$ 3=	
X42=	
+140=.	
TOTAL	
ADDITIONAL FEE	

**OR**

**OTHER THAN  
SMALL ENTITY**

RATE	ADDITIONAL FEE
X\$18=	
X\$4=	
+2\$0=	
TOTAL ADDITIONAL FEE	

2012305		(Column 1)	(Column 2)	(Column 3)
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	• 19	Minus • 18	• —
	Independent	• 1	Minus • 1	• —
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
X38=	
X42=	
+140=	
TOTAL	
ADDITIONAL FEE	

1

RATE	ADDITIONAL FEE
X\$18=	
X\$4=	
+280=	
TOTAL ADDITIONAL FEE	

AMENDMENT C	(Column 1)		(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	• 4	Minus	= 35	= 0
Independent	• 5	Minus	= 4	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDITIONAL FEE
X39=	
X42=	
+140=	
TOTAL	
ADDITIONAL FEE	

RATE	ADDITIONAL FEE
X\$18=	
XB4=	
+280=	
<b>TOTAL</b>	
<b>ADDITIONAL FEE</b>	


- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number

6-2-06

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AMENDMENT TRANSMITTAL LETTER				Docket No. UAB-15102/22	
Application No. 10/049,327-Conf. #3596		Filing Date May 15, 2002		Examiner L. M. Williams	
				Art Unit 1617	
Applicant(s): Jay M. Meythaler et al.					
Invention: Method of treating traumatic brain and spinal cord injuries and other neurogenic conditions using non-steroidal anti-inflammatory drugs and naturally occurring conotoxins					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	19	- 35 =		x	
Independent Claims	4	- 4 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					0.00
<input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____ A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>07-1180</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Avery N. Goldstein Attorney/Agent Reg. No.: 39,204				Dated: <u>June 1, 2006</u>	
GIFFORD, KRASS, GROH, SPRINKLE, ANDERSON & CITKOWSKI, P.C. 2701 Troy Center Drive, Suite 330 Post Office Box 7021 Troy, Michigan 48007-7021 (248) 647-6000					

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